

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ARCH LEADERSHIP PAC**A.**Full Name (Last, First, Middle Initial)  
BOYD FOR CONGRESSMailing Address P.O. Box 15703  
P.O. Box 15703

City Tallahassee State FL Zip Code 32317

Purpose of Disbursement

Candidate Name  
F. ALLEN JR. BOYDCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 02

Transaction ID: SB23.4167

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	0

Amount of Each Disbursement this Period

1000.00

**B.**Full Name (Last, First, Middle Initial)  
JIM HIMES FOR CONGRESS

Mailing Address 857 Post Road, #312

City Fairfield State CT Zip Code 06824

Purpose of Disbursement

Candidate Name  
JIM HIMESCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 04

Transaction ID: SB23.4157

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	0

Amount of Each Disbursement this Period

2400.00

**C.**Full Name (Last, First, Middle Initial)  
JIM HIMES FOR CONGRESS

Mailing Address 857 Post Road, #312

City Fairfield State CT Zip Code 06824

Purpose of Disbursement

Candidate Name  
JIM HIMESCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CT District: 04

Transaction ID: SB23.4161

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	0

Amount of Each Disbursement this Period

2600.00

SUBTOTAL of Disbursements This Page (optional) .....

6000.00

TOTAL This Period (last page this line number only) .....